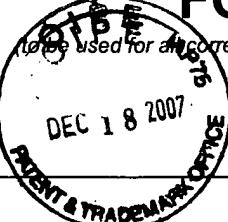
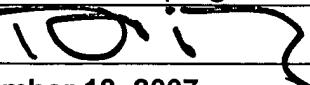


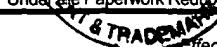
FJ/J

<b>TRANSMITTAL FORM</b>		Application Number 10/536,957
 <small>(Use for all correspondence after initial filing)</small>		Filing Date 05/31/2005
		First Named Inventor Buttau et al.
		Group Art Unit 3722
		Examiner Name ROSS, DANA
		Attorney Docket Number 49-004-TN

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement with Form PTO-1449 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <small>(for an Application)</small>  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> Request of Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <small>(Appeal Notice, Brief, Reply Brief)</small> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) <small>(please identify below):</small> <div style="border: 1px solid black; padding: 5px; height: 40px; margin-top: 5px;">           Copy of office communication issued from the EP patent office dated March 30, 2006         </div>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Posz Law Group, PLC DAVID G. POSZ (Reg. No. 37,701)
Signature	
Date	December 18, 2007

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



DEC 18 2007

Effective on 12/8/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL For FY 2008

Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 180)

Complete if Known	
Application Number	10/536,957
Filing Date	05/31/2005
First Named Inventor	Buttau et al.
Examiner Name	Ross, Dana
Art Unit	3722
Attorney Docket No.	49-004-TN

## METHOD OF PAYMENT (check all that apply)

- Check    Credit Card    Money Order    None    Other (please identify): \_\_\_\_\_
- Deposit Account   Deposit Account Number: 50-1147   Deposit Account Name: Posz Law Group, PLC
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- Charge fee(s) indicated below    Charges fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17    Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	FILING FEES		SEARCH FEES		EXAMINATION FEES		<u>Fees Paid (\$)</u>
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	
Utility	310	155	510	255	210	105	\$
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

<u>Small Entity</u>
Fee (\$)
50
25

Each independent claim over 3 (including Reissues)

<u>Fee (\$)</u>	<u>Fee (\$)</u>
210	105
370	185

Multiple dependent claims

<u>Total Claims</u>	Extra Claims		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	Multiple Dependent Claims		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
	- 20 or HP =	0	x	\$50	=	\$0		
HP = highest number of total claims paid for, if greater than 20							\$370	\$0
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>				
- 3 or HP =	0	x	\$210	=	\$0			

HP = highest number of independent claims paid for, if greater than 3

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	0	/ 50 =	(round up to a whole number) x	= \$0

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement Fee pursuant to 37 CFR 1.17(p)

\$180

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	37,701	Telephone	(703) 707-9110
Name (Print/Type)	DAVID G. POSZ			Date	December 18, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: BUTTAU, S.A.

Serial No.: 10/536,957

Filed: 5/31/2005

Title: TOOL HOLDING DEVICE AND  
METHOD FOR POSITIONING A TOOL



Atty. Dkt.: 49-004-TN

Art Unit: 3722

Examiner: ROSS, Dana

**Mail Stop Amendment**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Date: 18 December 2007

**AMENDMENT UNDER 37 CFR 1.111**

Sir:

In response to the office action mailed 20 November 2007, please amend the application as follows:

**Amendments to the Claims** are reflected in the listing of claims that begins on page 2 of this paper.

**Remarks** begin on page 5 of this paper.